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"Harm Reduction or Harm Maintenance: Is There a Such Thing as Safe Drug Abuse?"
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As a former Administrator of the U.S. Drug Enforcement Administration, my views on the issue of so called "Harm Reduction" are based on first hand experience leading the nation's leading drug law enforcement agency under three different Administrations (Presidents Ford, Carter, and Reagan), as Director of Corrections for the State of Illinois, as Chair of The Criminal Justice Information Authority in Illinois, and as CEO of a company Dr. Robert DuPont and I formed dealing with the issue of drugs in the work place.   Most recently, our company has been involved in Risk Monitoring Programs for prescription drug abuse and diversion.

The theory that by accepting drug use that is illegal and unhealthy, is preferable to discouraging such use by sanctions, prevention, education, and treatment is a proposal that is without science, without proven results, in violation of international treaties, and simply invokes the wrong message with the wrong tactics. It has been tried in Australia with disastrous results and in Vancouver Canada with a heroin abusing population that has skyrocketed. When sanctioned needle exchanges took place, the expectation was that HIV would drop, the opposite has occurred. The Vancouver drug epidemiology report of July 2003 indicated a 35% HIV prevalence "with one of the highest incident rates reported worldwide." The HIV prevalence before this program in the late 1980's was 1-2%. The Vancouver Drug User Injection Study (VIDUS) has an 82% prevalence of Hepatitis C. Both HIV and Hepatitis C rates have increased in Vancouver since the establishment of the Needle Exchange Program. The data on this program clearly indicates that needles were re-used, that infection rates went up, that heroin dependency went up … this was true in Montreal, in Seattle and in Glasgow. Sweden took a different approach and the results of drug use there and in Australia are worth studying.   Australia decriminalized cannabis and in the 1990's embraced harm reduction.   Sweden took a different approach…here are some comparative findings: lifetime prevalence of drug use for 16-29 year olds ...Sweden-9%, Australia-52% ... use in the previous year … Sweden-2%, Australia-33%. The estimated dependent heroin users of ages under 20...Sweden-1.5%...Australia-8.2%. Drug related deaths per million population … Sweden-23, Australia-48 ... drug offenses per million, Sweden-3100, Australia -1000. Average months in prison, Sweden -20, Australia-5. AIDS cases per million, Sweden-150, Australia-330. Australia in the late 1990's and early 2000's was taking its nation in the wrong direction...more deaths, more dependency, more AIDS, more drug use. Sweden was more successful in curbing the adverse effects of drug abuse by confronting it head on.

Harm reduction is not a science-based movement … it is political. Demand reduction, law enforcement, and treatment do work. The "Just Say No" program in the mid-1980's saw drug use decline from 22 million regular users to 17 million while our population was rising. A major enforcement effort aimed at Mexican heroin in the mid-1970's saw heroin overdose deaths decrease from 2000 per year to 800 by 1980. Recognition of the severe hazards of crack and cocaine use saw cocaine and crack use decrease dramatically in the past 20 years from 5 million users to less than 2 million regular users.

The message of harm reduction is irresponsible ... increasing help is far more effective than decreasing harm. Research - not rhetoric is needed. The notion that reducing consequences of harmful, unhealthy behavior is more effective than deterring it is like saying its better to enable students to smoke pot or crack than trying to prevent them from doing that. Our country, parents and students, teachers and coaches need clear signals ... behavior that is destructive to health, safety and others should and must be discouraged with consequences … not enabled without them.